

| TABLE | NAME                           | YEAR | P | ASSIGNED            | RECEIVED  |
|-------|--------------------------------|------|---|---------------------|-----------|
| 1     | AIR COMPLIANCE STATUS          | FY   | ✓ | R. ALEXANDER        |           |
| 2     | WASTEWATER COMPLIANCE STATUS   | FY   | ✓ | ALEXANDER           |           |
| 3     | OIL + HAZARDOUS SPILLS SUMMARY | FY   | ✓ | S. GUYAN            | ✓ ? DANNY |
| 4     | H.W. COMPLIANCE STATUS         | FY   | ✓ | ENV                 | ✓ ? DANNY |
| 5     | UST PROGRAM SUMMARY            | FY   | ✓ | R. ALEXANDER        |           |
| 6A    | PCB INVENTORY SUMMARY          | CY   |   |                     |           |
| 6B    | H.W. ACTIVITY SUMMARY          | CY   |   |                     |           |
| 7     | LANDFILL COMPLIANCE STATUS     | FY   | ✓ | ENV                 | ✓         |
| 8     | SPECIALIZED WASTE SUMMARY      | CY   |   |                     |           |
| 9.    | IR PROGRAM OVERVIEW            | FY   |   |                     |           |
| 10    | SDWA PROGRAM                   | FY   | ✓ | BETZ                | ✓         |
| 11    | PEST MANAGEMENT                | FY   |   |                     |           |
| 12    | PESTICIDE TRAINING             | FY   |   |                     |           |
| 13.   | NATURAL RESOURCES SUMMARY      | FY   | ✓ | BLACK +<br>PETERSON | ✓         |
| 14.   | FINANCIAL SUMMAY               | FY   | ✓ |                     | ✓         |
| 15    | SUMMARY OF NR PLANS            |      | ✓ |                     | ✓         |
| 16    | HISTORIC RESOURCES M. SUMMARY  | FY   | ✓ | ALEXANDER           |           |
| 17    | ENVIRONMENTAL AUDITING SUMMARY | FY   | ✓ | ALEXANDER           |           |

15360  
9895  
25255

16520

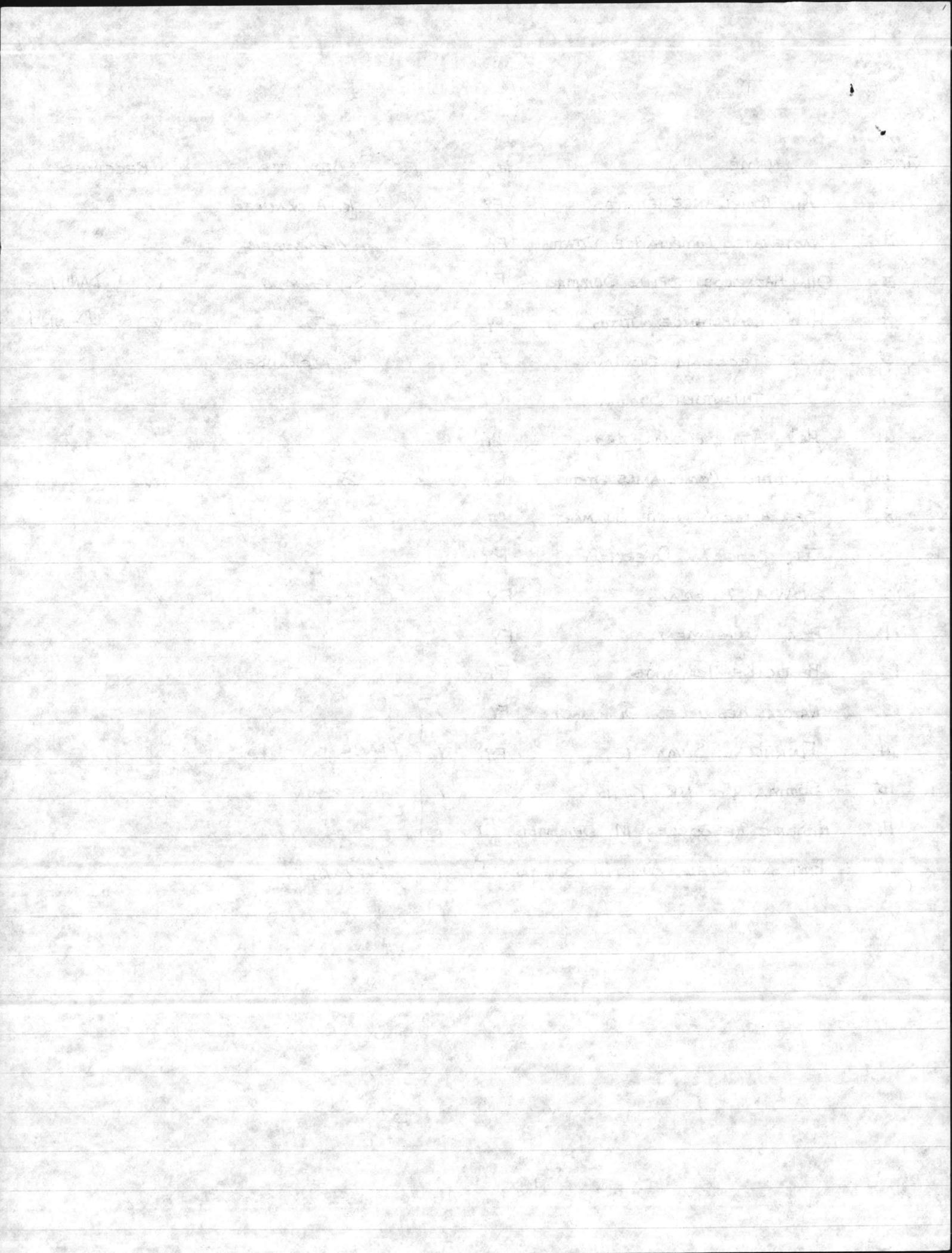


TABLE 3 OIL AND HAZARDOUS SUBSTANCE SPILLS SUMMARY

- 1. Provide copy of messages or details for:
  - Number of major oil spills 0
  - Number of medium oil spills 0
  - Number of minor oil spills 4
  - Number of reportable hazardous substance spills 0

2. SPCC status

- A. SPCC Plan required by service regulations or environmental laws. Provide copy of certification page.
- B. Identify active water PCR projects required by SPCC plans.

YES, SEE ATTACHED

DEFINITIONS

Hazardous Substance Spills

Substances listed by EPA which meet characteristics and quantities (for reporting purposes) specified by EPA under Clean Water Act regulations.

Major Oil Spill

A reportable oil spill which is either:

- over 100,000 gallons in coastal waters, or
- over 10,000 gallons in inland waters.

Medium Oil Spill

A reportable oil spill which is either:

- between 10,000 gallons and 100,000 gallons in coastal waters, or
- between 1,000 gallons and 10,000 gallons in inland waters.

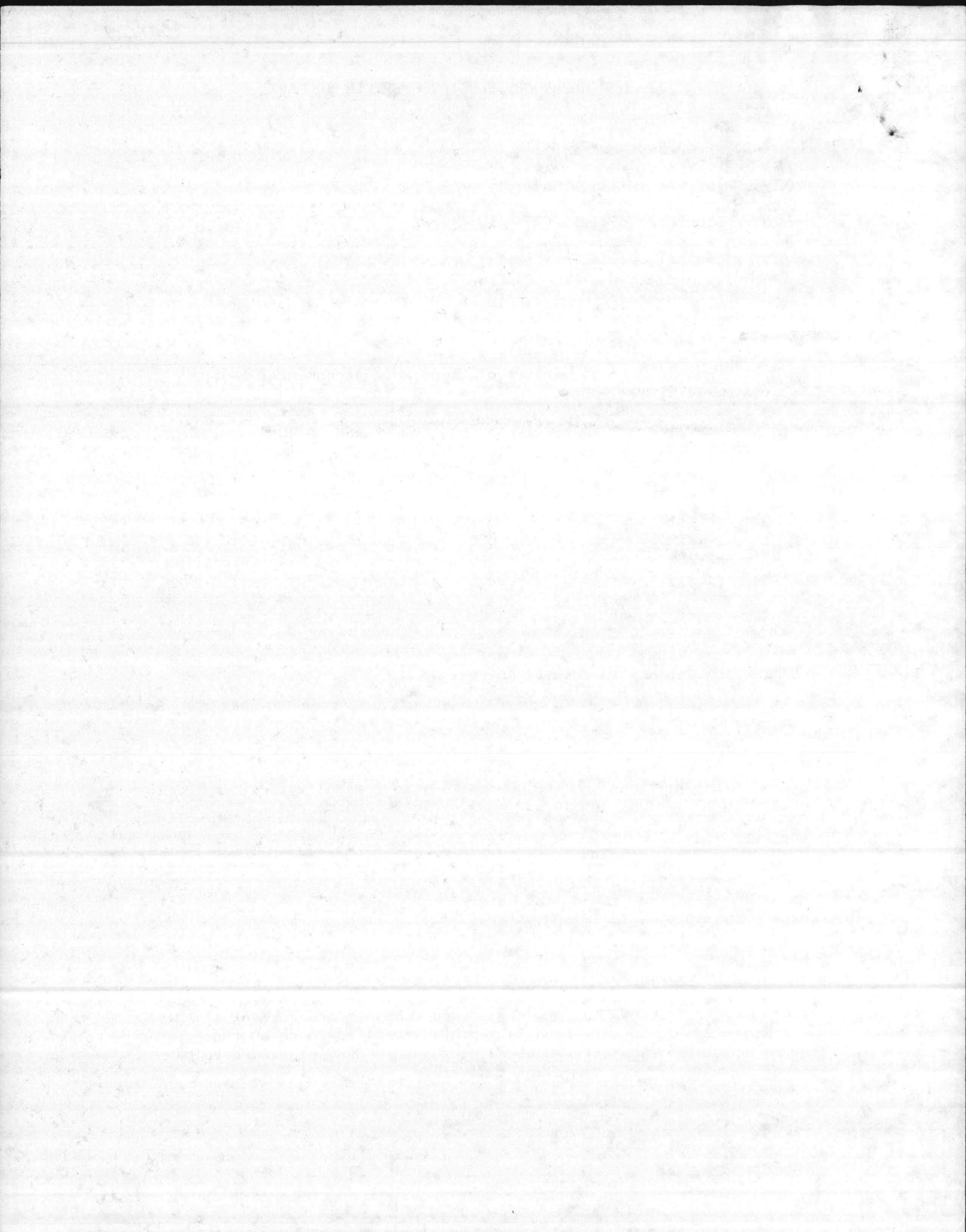
Minor Oil Spill

A reportable oil spill which is either:

- under 10,000 gallons in coastal waters, or
- under 1,000 gallons in inland waters.

SPCC,

Oil and/or hazardous substance spill prevention, control, and countermeasures. SPCC plans are considered complete and current if they have been prepared and certified by a professional engineer on the required schedule. Projects required pursuant to SPCC plans are to be reported separately from the plans themselves.



OIL SPILL PREVENTION CONTROL AND COUNTERMEASURES PLAN

UNITED STATES MARINE CORPS  
MARINE CORPS BASE  
CAMP LeJEUNE  
JACKSONVILLE, NORTH CAROLINA



REV: AUGUST 1, 1983  
July 15, 1982  
JUNE 10, 1978

PREPARED BY:

AUSTIN BROCKENBROUGH AND ASSOCIATES  
CONSULTING ENGINEERS  
P. O. BOX 4800  
CHESTER, VIRGINIA

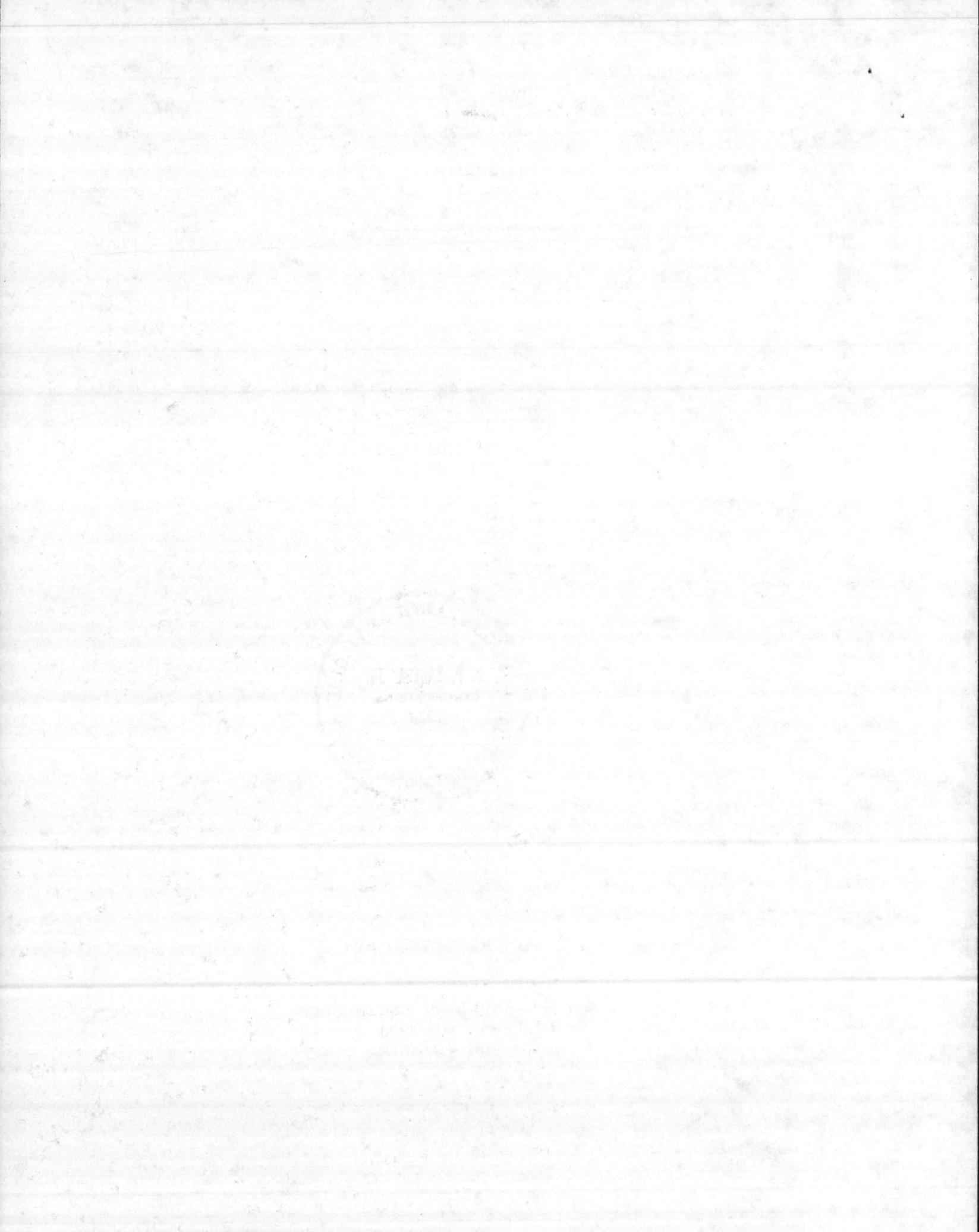


TABLE 4 HAZARDOUS WASTE COMPLIANCE STATUS

1. Do you have (Provide dates)

- A. Part A permit (interim status) *Open burning / open detonation of Ordnance*
- B. Part B application in process (Note 1) *Submitted 8 NOV 88*
- C. final Part B permit *1* OFF LAST YEAR'S REPORT
- D. Part B permit required solely due to storage *1*

*Part A permit*

2. Number of permitted Facilities\* (total) on 9/30 *? MARK'S SITES?*

- A. Treatment\*  B. Storage  C. Disposal

3. Number of notices of violation (NOVs)\* Provide dates received, resolved, who issued, and briefly describe or provide a copy of the NOV.

A. Number of NOVs unresolved at the start of FY88 (total)  *1*

- 1. NOVs which require administrative or operational changes to resolve *1*
- 2. NOVs which require pollution abatement project(s) to resolve

B. Number of NOVs received during FY88 (total) +

- 1. NOVs which require administrative or operational changes to resolve *0*
- 2. NOVs which require pollution abatement project(s) to resolve + *0*

C. Number of NOVs resolved during FY88 (total) + *0*

- 1. By administrative or operational methods *0*
- 2. By pollution abatement projects + *0*

4. Do you have a RCRA required groundwater monitoring programs *NO*

5. Do you have groundwater contamination\* from RCRA facilities *NO*

? 6. Does your installation require remedial action at TSD facilities (to satisfy NOVs) *NO*

*DOES LAST EPA Letter constitute A NOV Sep 28-30 inspection?*

*?? DDS*

*OFF LAST YEAR'S REPORT*  
*Yes*  
*0*  
*Waste oil tank cleaning/closure*

Note 1: Part B in process refers to a Part B permit which has been called for or submitted but not issued.

\* See Glossary for Definition

+ Provide a list of A-106 (PCR) Project Numbers for these projects

Handwritten notes on the left side of the page, including the word "Control" and some illegible scribbles.



Three small circles arranged vertically in the middle of the page.

Handwritten letters "ON" in the lower middle section.

Handwritten letters "UN" in the lower right section.

TABLE 7 SOLID WASTE LANDFILL (NON-HAZARDOUS) COMPLIANCE STATUS

1. Number of active landfills (list)
  - A. Permitted
  - B. Not permitted
2. Number of active landfills receiving small quantity generator hazardous waste
3. Number of inactive landfills
4. Number of notices of violation (NOVs)
  - A. Number of NOVs unresolved at the start of FY88 (total) Provide dates received, resolved, and briefly describe or provide a copy of the NOV.
    1. NOVs which require administrative or operational changes to resolve
    2. NOVs which require pollution abatement project(s) to resolve +
  - B. Number of NOVs received during FY88 (total)
    1. NOVs which require administrative or operational changes to resolve
    2. NOVs which require pollution abatement project(s) to resolve +
  - C. Number of NOVs resolved during FY88 (total)
    1. By administrative or operational methods
    2. By pollution abatement project(s)+

Permitted A source for which a required permit to operate has been obtained from the appropriate regulatory agency.

NOTE: Terms underlined and marked with an asterisk are defined in the glossary.

+ Provide a list of A-106 (PCR) Project Numbers for these projects

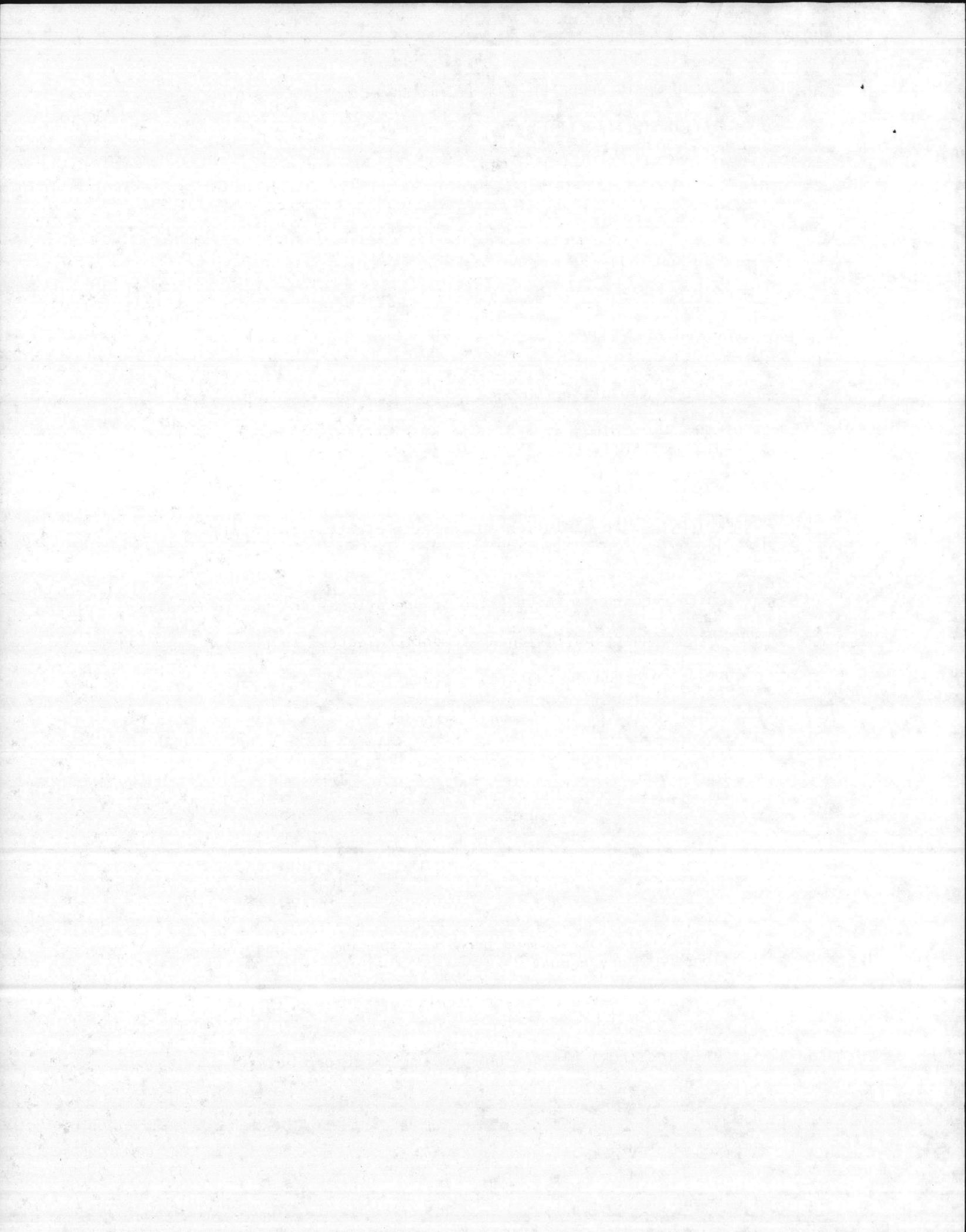


TABLE 10 SAFE DRINKING WATER PROGRAM

|  |   |
|--|---|
| 1. Number of DOD-owned water treatment systems (Note 1)(Note 2)  |   |
| A. Where standards were exceeded during FY88   | 2 |
| B. Where public notification was made  | 0 |
| C. Where problem was corrected   | 2 |
| D. Where groundwater is a water source (Note 2)  | 6 |
| 2. Number of purchased water supplies (including federally supported state or locally owned)   | 0 |
| A. Where standards were exceeded during FY88   | 0 |
| B. Where problem was corrected   | 0 |
| 3. Notices of violation (NOVs) (only for DOD-owned systems) Provide dates received, resolved, and briefly describe or provide a copy of the NOV. |   |
| A. Number of NOVs unresolved at start of FY88 (total)  | 0 |
| 1. Which require administrative or operational changes to resolve  | 0 |
| 2. Which require pollution abatement project(s) to resolve +   | 0 |
| B. Number of NOVs received during FY88 (total)   | 0 |
| 1. Which require administrative or operational changes to resolve  | 0 |
| 2. Which require pollution abatement project(s) to resolve +   | 0 |
| C. Number of NOVs resolved during FY88 (total)   | 0 |
| 1. By administrative or operational methods  | 0 |
| 2. By pollution abatement project(s) +   | 0 |

DEFINITIONS

Notice of Violation (NOV) An official written notice by EPA or an authorized state or local environmental regulatory agency of a violation of law or regulation.

Notification A public notification made pursuant to the Safe Drinking Water Act.

Standards Primary drinking water standards or other regulatory standards.

Note 1. Provide Narrative for each system with problems not corrected. Give location, standards exceeded and corrective action attempted for the current FY88.

+ Provide a list of A-106 (PCR) Project Numbers for these projects

Note 2. The Camp Lejeune Complex had eight DOD-owned groundwater water treatment systems until 1 April 1988. The State of North Carolina accepted the expansion of the Holcomb Blvd Plant which allowed for the closure of the Tarawa Terrace and Camp Johnson Plants

(Note 1)

(Note 2)

Note 1. The Game Machine Company had since 1900 owned and operated a  
game machine business in the State of North Carolina. The  
operation of the Game Machine Company was discontinued in the  
State of North Carolina and Game Machine Company.

PETER  
CHARLES

Together

TABLE 13 NATURAL RESOURCES MANAGEMENT SUMMARY

1. Please check correct response. Does your installation have:

|   | YES | NO, BUT<br>NEEDED |
|---|-----|-------------------|
| A. <u>Integrated natural resources program*</u> | ✓   |                   |
| B. <u>Wildlife management plan*</u>             | ✓   |                   |
| C. <u>Endangered species habitat*</u>           | ✓   |                   |
| D. <u>Hunting/fishing programs*</u>             | ✓   |                   |
| E. <u>Other outdoor recreation programs*</u>    |     |                   |
| F. <u>Outdoor recreation plan*</u>              |     |                   |
| G. <u>Public access*</u>                        | ✓   |                   |
| H. <u>DOD access only*</u>                      |     |                   |
| I. <u>User fees from all*</u>                   | ✓   |                   |
| J. <u>User fees from public only*</u>           |     |                   |
| K. <u>Forest management plan*</u>               | ✓   |                   |
| L. <u>Land management plan*</u>                 |     |                   |
| M. <u>Agriculture/grazing outlease program*</u> |     |                   |
| N. <u>Fish and Wildlife cooperative plan*</u>   | ✓   |                   |
| O. <u>Potential to increase*</u>                |     |                   |
| 1. Agricultural/grazing outleases               |     |                   |
| 2. Commercial forest management                 | ✓   |                   |
| 3. Hunting                                      | ✓   |                   |
| 4. Fishing                                      | ✓   |                   |
| 5. Other outdoor recreation                     | ✓   |                   |

2. Was your installation reviewed\* this year?

NOTE: Terms underlined and marked with an asterisk are defined in the glossary.

CHARLES

10/2/40

TABLE 14

(1) FINANCIAL SUMMARY

A. Outdoor recreation\*

- 1. Sikes Act fees collected\*
- 2. Wildlife program expenses\*

A. Paid with fee \$

24,376

B. Paid with other \$

15,066

B. Agriculture and Grazing outleases\*

- 1. Cash receipts\*
- 2. Value of services\*
- 3. Expenses\*
- 4. Investments/improvements\*

C. Forest products\*

1. Gross receipts\*

772,717

2. Expenses\*

402,224

3. States' entitlements\*

148,197

(2) ACREAGE SUMMARY

|   | Number<br>of Acres* | Public<br>Access<br>(Acres) | DOD<br>Access<br>Only<br>(Acres) |
|---|---------------------|-----------------------------|----------------------------------|
| A. Available for hunting/fishing                          | 76,560              | 76,500                      |                                  |
| B. Available for other outdoor recreation                 | 76,506              | 0                           |                                  |
| C. Outleased for agriculture/grazing                      | 0                   | ////                        | ////                             |
| D. Available for agriculture/grazing<br>but not outleased | 0                   | ////                        | ////                             |
| E. Managed forests  | 76,400              | ////                        | ////                             |
| F. Total installation acreage*                            | 34,821              | ////                        | ////                             |

\* Defined in the glossary.

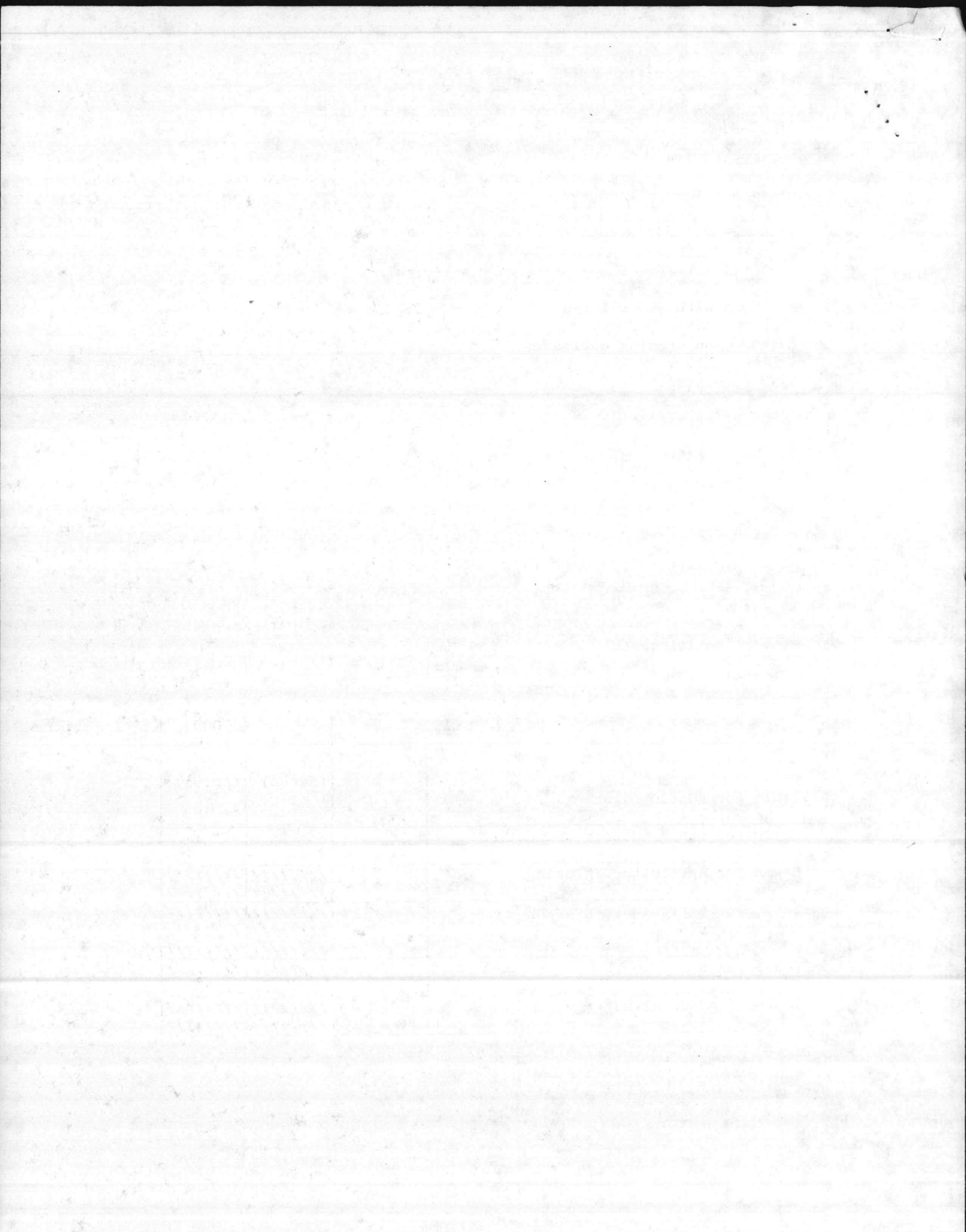


TABLE 15 SUMMARY OF NATURAL RESOURCES PLANS AND STAFF

Indicate status of the following for your activity:

| A. Plans                    | Completed          | To be completed/updated in |        |        |        |  |
|-----------------------------|--------------------|----------------------------|--------|--------|--------|--|
|                             | in current<br>FY88 | FY + 1                     | FY + 2 | FY + 3 | FY + 4 |  |
|                             | ////               | ////                       | ////   | ////   | ////   |  |
| 1. Land management          |                    |                            |        |        |        |  |
| 2. Forest management        |                    | ✓                          | ✓      | ✓      | ✓      |  |
| 3. Fish/wildlife management |                    | ✓                          | ✓      | ✓      | ✓      |  |
| 4. Outdoor recreation       |                    |                            |        |        |        |  |

B. Professional Staff\*

On-Site\*

|                                      | Biologist | Forester | Agronomist | Other |
|--------------------------------------|-----------|----------|------------|-------|
| <u>On Board*</u>                     | 1         | 3        |            |       |
| <u>Authorized,<br/>Not on Board*</u> |           | 0        |            |       |

Off-Site\*

|                                      | Biologist | Forester | Agronomist | Other |
|--------------------------------------|-----------|----------|------------|-------|
| <u>On Board*</u>                     |           | 0        |            |       |
| <u>Authorized,<br/>Not on Board*</u> | 0         | 0        |            |       |

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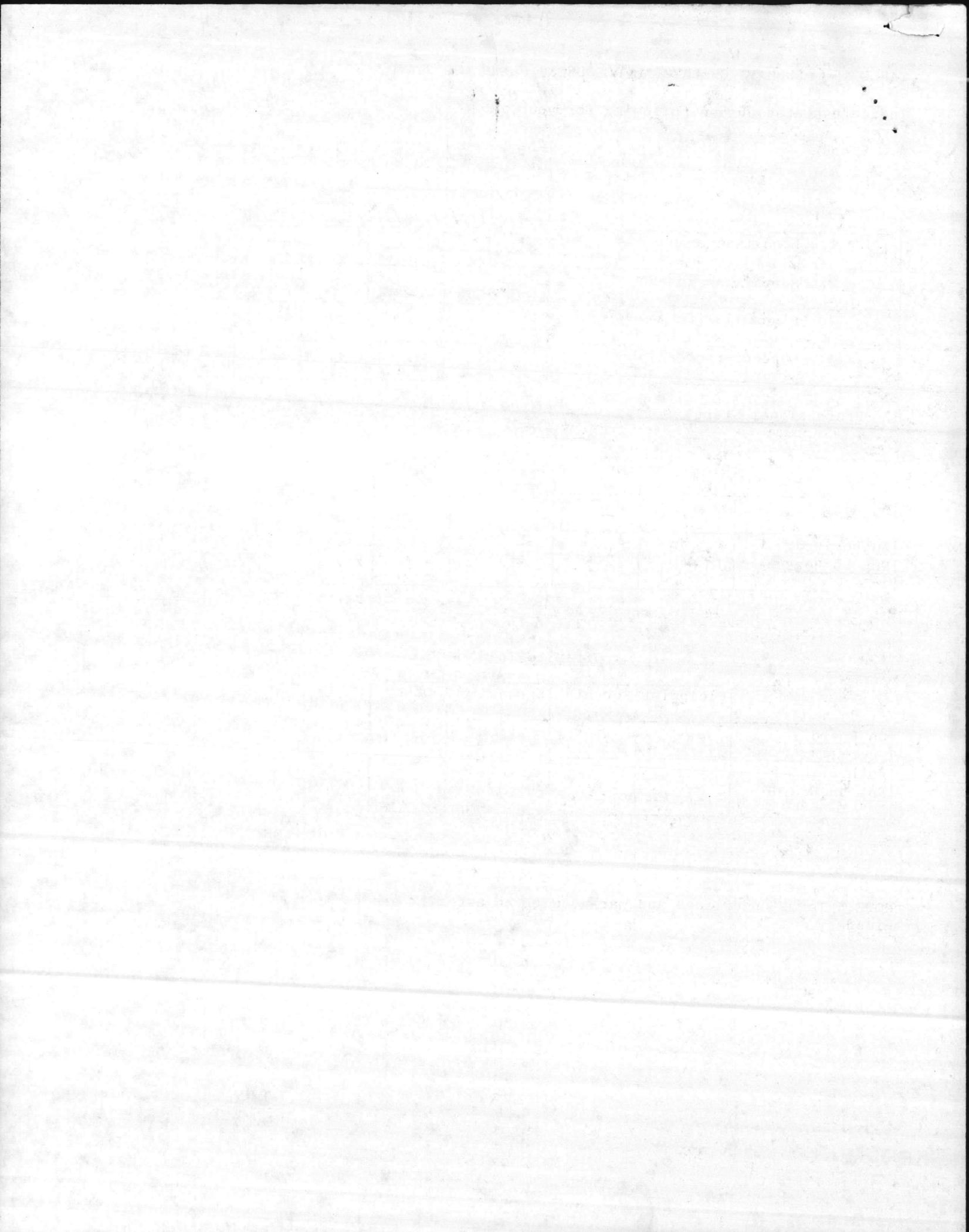


TABLE 16 HISTORIC RESOURCES MANAGEMENT SUMMARY

A. Indicate correct response for your installation.

2  
input

|  | Completed | In Progress | Needed  |
|--|-----------|-------------|---|
| 1. <u>Overview*</u>  |           |             |   |
| 2. <u>Inventory*</u> of  |           |             |   |
| a. Structures  |           |             |   |
| b. Archeological resources   |           |             |   |
| 3. <u>PA*</u> with <u>SHPO*</u> /<br><u>Advisory council*</u>          |           |             |   |
| 4. <u>Historic preservation plan*</u>                                  |           |             |   |
| 5. <u>Plan integrated/coordinated*</u>                                 |           |             |   |
| 6. Property listed on <u>National Register*</u> or determined eligible |           |             | /////////<br>/////////<br>/////////<br>/////////<br>///////// |

B. Funds Expended:

- A. For plans, surveys, inventories \_\_\_\_\_
- B. For rehab\* and treatment\* \_\_\_\_\_

C. Professional Staff\*

On-Site\*

|                                  |                       |         |                 |
|----------------------------------|-----------------------|---------|-----------------|
|                                  | TABLE 16              | History | Anthropology    |
| <u>On Board</u>                  | B. FUNDS EXPENDED     |         |                 |
| <u>Authorized, Not on Board*</u> | B. For REHAB          |         | \$ <u>2,738</u> |
| Total                            | FROM CHARLES PETERSON |         |                 |
|                                  | 1/12/89 1310          |         |                 |
| <u>On Board</u>                  |                       |         |                 |
| <u>Authorized, Not on Board*</u> |                       |         |                 |

NOTE: Terms underlined and marked with an asterisk are defined in the glossary.



TABLE 16 HISTORIC RESOURCES MANAGEMENT SUMMARY

A. Indicate correct response for your installation.

2  
input

|  | Completed | In Progress | Needed  |
|--|-----------|-------------|---|
| 1. <u>Overview*</u>  |           |             |   |
| 2. <u>Inventory*</u> of  |           |             |   |
| a. Structures  |           |             |   |
| b. Archeological resources   |           |             |   |
| 3. <u>PA*</u> with <u>SHPO*</u> /<br><u>Advisory council*</u>          |           |             |   |
| 4. <u>Historic preservation plan*</u>                                  |           |             |   |
| 5. <u>Plan integrated/coordinated*</u>                                 |           |             |   |
| 6. Property listed on <u>National Register*</u> or determined eligible |           |             | /////////<br>/////////<br>/////////<br>/////////<br>///////// |

B. Funds Expended:

A. For plans, surveys, inventories \_\_\_\_\_

B. For rehab\* and treatment\* \_\_\_\_\_

C. Professional Staff\*

On-Site\*

|                                  | Architect | History | Anthropology |
|----------------------------------|-----------|---------|--------------|
| <u>On Board</u>                  |           |         |              |
| <u>Authorized, Not on Board*</u> |           |         |              |
| Total                            |           |         |              |

Off-Site\*

|                                  | Architect | History | Anthropology |
|----------------------------------|-----------|---------|--------------|
| <u>On Board</u>                  |           |         |              |
| <u>Authorized, Not on Board*</u> |           |         |              |

NOTE: Terms underlined and marked with an asterisk are defined in the glossary.

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